



STATE HEALTH BENEFIT PLAN FOR NEW ENROLLEES FOR 2011

Overview

The State Health Benefit Plan (SHBP) is the division of the Georgia Department of Community Health (DCH) responsible for the administration of the health insurance offered to state employees, teachers, school personnel and certain contract groups.

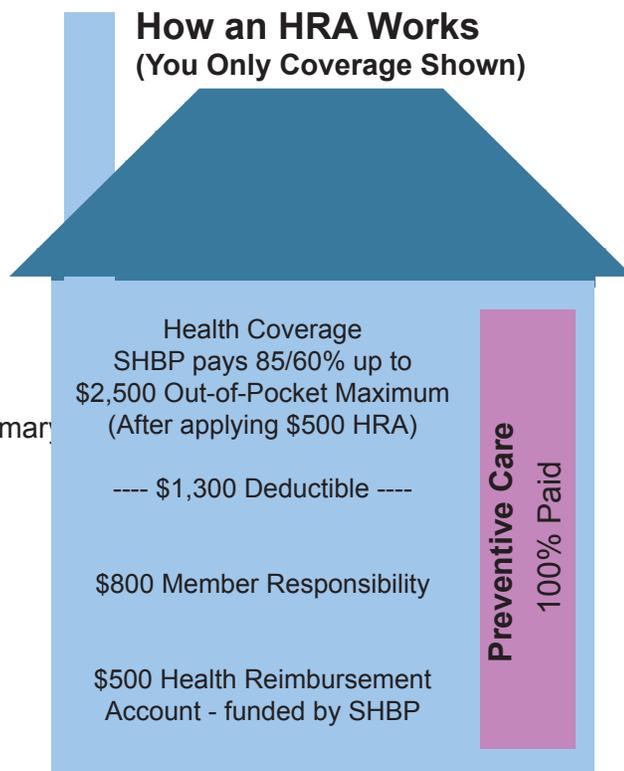
SHBP offers new enrollees the opportunity to choose between two consumer driven health options: the Health Reimbursement Arrangement (HRA) and the High Deductible Health Plan (HDHP) both offered by CIGNA and UnitedHealthcare (UHC).

Health Reimbursement Arrangement (HRA)

Benefits include:

- Low premiums
- 100% unlimited wellness benefit for each covered member based on national age and gender guidelines when seeing an in-network provider. This benefit does not reduce your HRA account
- SHBP contributes dollars to your HRA for medical and pharmacy first dollar expenses and these dollars reduce your deductible and out-of-pocket maximum
- Once the HRA dollar credits are exhausted, the member is responsible for a deductible
- Once the deductible has been satisfied, eligible charges are payable at 85 percent of the in-network contracted amount and 60 percent of the usual and customary out-of-network rate
- Any unused HRA dollars roll over to the next Plan Year if you keep HRA coverage
- Access to a national network of physicians, facilities and other health care professionals
- Ability to see specialists without a referral
- Selection of a primary care physician is not required

How an HRA Works (You Only Coverage Shown)



(Note: This option does not have co-pays even for prescription drugs. Members will pay the 15 percent generic and 25 percent brand for in-network pharmacies or 40 percent co-insurance if out-of-network).

A SNAPSHOT OF SHBP COVERAGE FOR NEW ENROLLEES

○ **The High Deductible Health Plan (HDHP):**

The HDHP provides in-network and out-of-network benefits for covered services. It has higher annual deductibles and out-of-pocket maximums than most other SHBP health care plans in return for lower premiums.

○ **What are the Benefits of the High Deductible Health Plan?**

- Access to a national network of physicians, facilities and other health care professionals
- Ability to see specialists without a referral
- Selection of a primary care physician is not required
- Ability to use both in- and out-of-network providers
- Out-of-pocket maximum limit for expenses the member pays
- Ability to contribute to a Health Savings Account (HSA)
- 100% unlimited wellness benefit for each covered member based on national age and gender guidelines when seeing an in-network provider

Note: The entire deductible must be satisfied before benefits are paid for any covered dependent (Family = you + spouse + children)

○ **What is a Health Savings Account (HSA)?**

Members participating in the High Deductible Health Plan may also participate in an HSA. An HSA allows members to set aside tax-exempt funds for future medical expenses. Many HSA accounts offer investment options and are portable. Unused funds roll over from year to year, are owned by the member and can be taken into retirement.

○ **Other Important Information:**

• **SHBP Tobacco and Spousal Surcharges**

SHBP charges tobacco and spousal surcharges. The \$50 monthly spousal surcharge applies to any member whose spouse is eligible for coverage through his/her employer but elects not to take the coverage. The \$80 tobacco surcharge applies to any member who uses and/or one of his/her dependents use tobacco products or have used tobacco products within the last 12 months. This surcharge is designed to encourage tobacco users to adopt a healthier lifestyle. A tobacco cessation health coaching program through CIGNA and UHC is offered to members and dependents who want to stop using tobacco products.

• **SHBP Annual Open Enrollment Period**

SHBP offers an annual open enrollment period each year in the fall and members are able to select from the consumer driven health options and the Health Maintenance Organizations (HMO) offered by CIGNA and UHC during this period.

• **SHBP Qualifying Events**

If members have a qualifying event, they may be able to make changes for themselves and their dependents, provided they request the change prior to or within 31 days after the qualifying event. Also, the requested change must correspond to the qualifying event. For a complete description of qualifying events, members should contact the Eligibility Unit at 404-656-6322 in metropolitan Atlanta or 800-610-1863 or refer to their Summary Plan Description (SPD).

A SNAPSHOT OF SHBP COVERAGE FOR NEW ENROLLEES

- If you decline coverage when you first become eligible, your options will be limited to the HRA and HDHP should you enroll at a future time, or if you drop out of the plan and re-enroll at a later date. Please refer to the SPD for more details
- If you terminate employment and are re-hired by any employer eligible for the SHBP during the same Plan year, you must enroll in the same Plan option and tier, (even if there is a gap in coverage) provided you are eligible for that option and have not had a qualifying event since coverage ended
- If the termination is in one year and you are hired in the following year, with a gap in coverage, you are restricted to the consumer driven health plan options: the HRA and HDHP with the new employer

These are a partial listing of benefits. See the 2011 Health Plan Decision Guide or Summary Plan Descriptions available at www.dch.ga.gov/shbp.

Disclaimer: *This material is for informational purposes and is not a contract. It is intended only to highlight principal eligibility and benefits. Every effort has been made to be as accurate as possible; however, should there be a difference between this information and the Plan documents, the Plan documents govern. It is the responsibility of each member, active or retired, to read the Summary Plan Description and all Plan materials provided in order to fully understand the eligibility and option provisions.*